(c) whether Government have issued any instructions to the pharmaceutical companies to test and certify all paediatric medicines; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Generally, the clinical trial at various phases during the course of development of a new drug is conducted on adult patient population because of difficulty in undertaking trials on children. However, depending upon the safety profile, the paediatricians may use these drugs for treatment of various diseases and disorders in children in recommended paediatric doses, unless during the market authorization, there is any specific restriction for use of a drug in children.

As per the standard texts and medical literature, drugs like morphine, thyrozine (thyroxine) and most of anti-epileptic drugs are also being used in children.

(c) and (d) The Schedule Y to Drugs and Cosmetics Rules, which was amended in January 2005 provides that if a new drug has **a** potential for use in paediatric patients, paediatric safety study should be conducted. In cases where there is limited paediatric data at the time of submission of application, more data in paediatric patients would be expected after marketing authorization for use in children is granted.

Women's access to quality health care

2042. MS. PRAMILA BOHIDAR:
SHRI B.J. PANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have drawn up some action plan to improve women's access to quality health care services in the rural areas; and

(b) if so, the details of this action plan so far it relates to Orissa State?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Under the National Rural Health Mission (NRHM) women's access to quality

health care services is being improved through strengthening of initiatives under the Reproductive & Child Health (RCH) programme. Special focus for implementation of NRHM is on 18 States, which have weak public health indicators and/or weak infrastructure including the State of Orissa. The following initiatives have been taken.

The second phase of the RCH Programme taken up in all the States including Orissa seeks to improve all aspects of reproductive health services for women.

Implementation of the Janani Suraxsha Yojana (JSY) for increasing access to institutional delivery for women Below the Poverty Line (BPL).

Appointment of Accredited Social Health Activist (ASHA) for every village with a population upto 1000 to facilitate the access of health care services to the community.

Operationalising Community Health Centres as First Referral Units (FRU) for providing Emergency Obstetric and Child Health Services

Making 50% Primary Health Centres functioning for providing 24 hours delivery services over a period of five years.

Establishing referral linkages between village, PHC, CHC and FRU.

Ensuring quality of services by implementing Indian Public Health Standards (IPHS) for Primary Health Care Facilities.

Provision of Essential drugs and equipment

Fund allocation of AIIMS like hospitals

†2043. SHRIMATI SUSHMA SWARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that an announcement was made to upgrade six hospitals of the country to the level of AIIMS by the previous Government;

(b) whether foundation stones were laid for upgradation of these hospitals;

(c) if so, the names of the institutes where these foundation stones were laid and dates thereof;

†Original notice of the question was received in Hindi.